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RCFE Specialty Tool: Personnel Records and Staff Training Domain

The RCFE Specialty Tool for the *Personnel Records and Staff Training Domain* provides state licensing requirements in statute and regulations that are related to personnel records and staff training.

This Specialty Tool is intended to be used during Comprehensive Visits in instances where non-compliance with personnel records and/or staff training requirements is identified. This Tool can be used by licensees to self-assess compliance with requirements.

Requirement	Citation
	Citation
Plan of Operation	
T-22, §87208(a) Each facility shall have and maintain a current, written definitive plan of operation. The plan and related materials	T-22, §87208(a)(6)
shall be on file in the facility and shall be submitted to the licensing agency with the license application. Any significant changes in	
the plan of operation which would affect the services to residents shall be submitted to the licensing agency for approval. The plan	
and related materials shall contain the following:	
(6) Plan for training staff, as required by Section 87411(c).	
Personnel Records Available to Licensing Agency	
Records Removed Are Available in Another Document or Format, Listed, and Undamaged Upon Return	T-22, §87412(f)(1)-
	(3)
T-22, §87412(f) All personnel records shall be available to the licensing agency to inspect, audit, and copy upon demand during	
normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the following	
requirements:	
(1) Licensing representatives shall not remove any current emergency or health-related information for current personnel	
unless the same information is otherwise readily available in another document or format.	
(2) Prior to removing any records, a licensing representative shall prepare a list of the records to be removed, sign and date the	
list upon removal of the records and leave a copy of the list with the administrator or designee.	
(3) Licensing representatives shall return the records undamaged and in good order within three business days following the	
date the records were removed.	
Personnel Records Location	
T-22, §87412(g) All personnel records shall be maintained at the facility.	T-22, §87412(g)(1)
(1) The licensee shall be permitted to retain such records in a central administrative location provided that they are readily	, - , 5,7,7
available to the licensing agency at the facility as specified in Section 87412(f).	
Personnel Records Retention	
T-22, §87412(h) All personnel records shall be retained for at least three (3) years following termination of employment.	T-22, §87412(h)

Personnel Record Content – Licensee, Administrator, All Employees, and All Volunteers	
Identifying Information, Employment, Education, Experience, Health Screening & Criminal Record Clearance	T-22, §87412(a)(1)-
T-22, §87412(a) The licensee shall ensure that personnel records are maintained on the licensee, administrator and each employee.	(13)
Each personnel record shall contain the following information:	
(1) Employee's full name.	
(2) Social Security number.	
(3) Date of employment.	
(4) Written verification that the employee is at least 18 years of age, including, but not necessarily limited to, a copy of his/her	
birth certificate or driver's license.	
(5) Home address and telephone number.	
(6) Educational background.	
(A) For administrators this shall include verification that he/she meets the educational requirements in 87405(b) and (c).	
(7) Past experience, including types of employment and former employers.	
(8) Type of position for which employed.	
(9) Termination date if no longer employed by the facility.	
(10) Reasons for leaving.	
(11) A health screening as specified in Section 87411, Personnel Requirements - General.	
(12) Hazardous health conditions documents as specified in Section 87411, Personnel Requirements - General.	
(13) For employees that are required to be fingerprinted pursuant to Section 80355, Criminal Record Clearance:	
(A) A signed statement regarding their criminal record history as required by Section 87355(d).	
(B) Documentation of either a criminal record clearance or a criminal record exemption as required by Section 87355(e).	
1. For Certified Administrators, a copy their current and valid Administrative Certification meets this	
requirement.	
Health Screening & Documentation of Any Hazardous Health Conditions	T-22, §87411(f)
T-22, §87411(f) All personnel, including the licensee and administrator, shall be in good health, and physically and mentally capable	
of performing assigned tasks. Good physical health shall be verified by a health screening, including a chest x-ray or an intradermal	
test, performed by a physician not more than six (6) months prior to or seven (7) days after employment or licensure. A report shall	
be made of each screening, signed by the examining physician. The report shall indicate whether the person is physically qualified to	
perform the duties to be assigned, and whether he/she has any health condition that would create a hazard to him/herself, other	
staff members or residents. A signed statement shall be obtained from each volunteer affirming that he/she is in good health.	
Personnel with evidence of physical illness or emotional instability that poses a significant threat to the well-being of residents shall	
be relieved of their duties.	
Criminal Record Clearance	H&S §1569.17(b)(1)-
	(2)
H&S §1569.17. (b) In addition to the applicant, the provisions of this section shall apply to criminal record clearances and	
exemptions for the following persons:	

- (1) (A) Adults responsible for administration or direct supervision of staff.
 - (B) Any person, other than a client, residing in the facility. Residents of unlicensed independent senior housing facilities that are located in contiguous buildings on the same property as a residential care facility for the elderly shall be exempt from these requirements.
 - (C) Any person who provides client assistance in dressing, grooming, bathing, or personal hygiene. Any nurse assistant or home health aide meeting the requirements of Section 1338.5 or 1736.6, respectively, who is not employed, retained, or contracted by the licensee, and who has been certified or recertified on or after July 1, 1998, shall be deemed to meet the criminal record clearance requirements of this section. A certified nurse assistant and certified home health aide who will be providing client assistance and who falls under this exemption shall provide one copy of his or her current certification, prior to providing care, to the residential care facility for the elderly. The facility shall maintain the copy of the certification on file as long as the care is being provided by the certified nurse assistant or certified home health aide at the facility. Nothing in this paragraph restricts the right of the department to exclude a certified nurse assistant or certified home health aide from a licensed residential care facility for the elderly pursuant to Section 1569.58.
 - (D) Any staff person, volunteer, or employee who has contact with the clients.
 - (E) If the applicant is a firm, partnership, association, or corporation, the chief executive officer or other person serving in a similar capacity.
 - (F) Additional officers of the governing body of the applicant or other persons with a financial interest in the applicant, as determined necessary by the department by regulation. The criteria used in the development of these regulations shall be based on the person's capability to exercise substantial influence over the operation of the facility.
- (2) The following persons are exempt from requirements applicable under paragraph (1):
 - (A) A spouse, relative, significant other, or close friend of a client shall be exempt if this person is visiting the client or provides direct care and supervision to that client only.
 - (B) A volunteer to whom all of the following apply:
 - (i) The volunteer is at the facility during normal waking hours.
 - (ii) The volunteer is directly supervised by the licensee or a facility employee with a criminal record clearance or exemption.
 - (iii) The volunteer spends no more than 16 hours per week at the facility.
 - (iv) The volunteer does not provide clients with assistance in dressing, grooming, bathing, or personal hygiene.
 - (v) The volunteer is not left alone with clients in care.
 - (C) A third-party contractor retained by the facility if the contractor is not left alone with clients in care.
 - (D) A third-party contractor or other business professional retained by a client and at the facility at the request or by permission of that client. These individuals shall not be left alone with other clients.
 - (E) Licensed or certified medical professionals are exempt from fingerprint and criminal background check requirements imposed by community care licensing. This exemption does not apply to a person who is a community care facility licensee or an employee of the facility.
 - (F) Employees of licensed home health agencies and members of licensed hospice interdisciplinary teams who have contact with a resident of a residential care facility at the request of the resident or resident's legal decisionmaker are exempt from

fingerprint and criminal background check requirements imposed by community care licensing. This exemption does not apply to a person who is a community care facility (ilcensee or an employee of the facility. (G) Clergy and other spiritual caregivers who are performing services in common areas of the residential care facility, or who are advising an individual resident at the request of, or with permission of, the resident, are exempt from fingerprint and criminal background check requirements imposed by community care ilcensing. This exemption does not apply to a person who is a community care facility licensee or an employee of the facility. (H) Any person similar to those described in this subdivision, as defined by the department in regulations. (I) Nothing in this paragraph shall prevent a licensee from requiring a criminal record clearance of any individual exempt from the requirements of this section, provided that the individual has client contact. Title 22, \$87355(d) All individuals subject to a criminal record review shall be fingerprinted and sign a Criminal Record Statement (ILC 508 must. (IA) Declare whether he/she has been convicted of a crime, other than a minor traffic violation as specified in Section 87355(h) regardless of whether the individual was granted a pardon for the conviction, received an expungement pursuant to Penal Code 1203.4 or the individual was granted a pardon for the conviction, received an expungement pursuant to Penal Code 1203.4 or the individual was granted a pardon for the conviction, received an expungement pursuant to Penal Code 1203.4 or the individual's record was sealed as a result of a court order. (B) If convicted of a crime other than a minor traffic violation as specified in Section 87355(h), provide information regarding the conviction, for any crime other than a minor traffic violation for which the fine was \$300 or less, the licensee shall submit these fingerprints of the partment shall take the same actions as would be taken in Health and Safety Code s		
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		(e)-(f)
(6) Have a high school diploma or equivalent, such as a General Education Development (GED) certificate.		
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(e) The administrator of a facility licensed for sixteen (16) to forty-nine (49) residents shall have completed, with a passing grade, at least fifteen (15) college or continuing education semester or equivalent quarter units; and shall have at least one year's experience providing residential care to the elderly; or equivalent education and experience as approved by the Department. (f) The administrator in facilities licensed for fifty (50) or more shall have two years of college; at least three years experience providing residential care to the elderly; or equivalent education and experience as approved by the licensing agency.	
Exemption from Education – Licensed or Employed Prior to July 1, 1982	T-22, §87405(g)
T-22, §87405(g) Administrators employed/licensed prior to July 1, 1982, shall not be required to comply with the college and	1 22, 307 403(6)
continuing education requirements in Section 87405(e) or the college requirements in Section 87405(f) provided that they have no	
break in employment as a Residential Care Facility for the Elderly administrator exceeding three (3) consecutive years.	
Personnel Record Content – All Volunteers	
Health Statement & Criminal Record Clearance	T-22, §87412(b)(1)-
T-22, §87412(b) Personnel records shall be maintained for all volunteers and shall contain the following:	(3)
(1) A health statement as specified in Section 87411(e).	(3)
(2) Health screening documents as specified in Section 87411(e).	
(3) For volunteers that are required to be fingerprinted pursuant to Section 87355, Criminal Record Clearance:	
(A) A signed statement regarding their criminal record history as required by Section 87355(d).	
(B) Documentation of either a criminal record clearance or a criminal record exemption as required by Section 87355(e).	
T-22, §87355 (j) The licensee shall maintain documentation of criminal record clearances or criminal record exemptions of	T-22, §87355(j)
employees in the individual's personnel file as required in Section 87412, Personnel Records.	
T-22, §87355(k) The licensee shall maintain documentation of criminal record clearances or criminal record exemptions of	T-22, §87355(k)
volunteers that require fingerprinting and non-client adults residing in the facility.	&(k)(1)
(1) Documentation shall be available at the facility for inspection by the Department.	
Personnel Record Content – Adequate Staff Coverage	•
T-22, §87412(e) In all cases, personnel records shall demonstrate adequate staff coverage necessary for facility operation by documenting the hours actually worked.	T-22, §87412(e)
Personnel Record Content – Administrator Certification	
Initial Certification	H&S §1569.616(a)(1)
H&S §1569.616(a)(1) An administrator of a residential care facility for the elderly shall be required to successfully complete a	
department-approved certification program prior to employment.	
* Information Only *	T-22 §87406(a)(1)-(2)
Exemption from Certification – Valid Nursing Home Administrator License or Was Both Licensee and Administrator On or Before	
July 1, 1991	
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T-22 §87406(a) All individuals shall be residential care facility for the elderly certificate holders prior to being employed as an administrator.	

shall be exempt from completing an approved Initial Certification Training Program and taking a written exam, provided the	
individual completes twelve (12) hours of classroom instruction in the following Core of Knowledge areas:	
(A) Four (4) hours of instruction in laws, regulations, policies, and procedural standards that impact the operations of	
residential care facilities for the elderly, including but not limited to the authority referenced in this Chapter.	
(B) Four (4) hours of instruction in medication management, including the use, misuse, and interaction of drugs	
commonly used by the elderly, including antipsychotics, and the adverse effects of psychotropic drugs for use in controlling	
the behavior of persons with dementia.	
(C) Four (4) hours of instruction in resident admission, retention, and assessment procedures.	
(2) Individuals who were both the licensee and administrator on or before July 1, 1991, shall complete an Initial Certification	
Training Program but shall not be required to take the written exam. Individuals exempted from the written exam shall be issued	
a conditional certification valid only for the administrator of the facility for which the exemption was granted.	
(A) As a condition to becoming a certified administrator of another facility, a holder of a conditional certificate issued	
pursuant to Section 87406(a)(2) shall be required to pass the written exam.	
(B) As a condition to applying for a new facility license, the holder of a conditional certificate issued pursuant to Section	
87406(a)(2) shall be required to pass the written exam.	
Exemption from Recertification – Valid Nursing Home Administrator License	T-22, §87407(g)
T-22, §87407(g) Certificate holders who possess a valid Nursing Home Administrator license shall be required to complete only twenty	
(20) of the required forty (40) hours of continuing education, but including the requirements of Section 87407(a)(1)-(3).	
Documentation of Certification	T-22, §87412(d)
T-22, §87412(d) The licensee shall maintain documentation that an administrator has met the certification requirements specified in	
Section 87406, Administrator Certification Requirements or the recertification requirements in Section 87407, Administrator	
Recertification Requirements.	
Personnel Record Content – Administrator Substitute Training	
H&S §1569.618(b) At least one administrator, facility manager, or designated substitute who is at least 21 years of age and has	H&S §1569.618(b)(3)
qualifications adequate to be responsible and accountable for the management and administration of the facility	
administratorpursuant to Title 22 of the California Code of Regulations shall be on the premises 24 hours per day. The designated	
substitute may be a direct care staff member who shall not be required to meet the educational, certification, or training	
requirements of an administrator. The designated substitute shall meet qualifications that include, but are not limited to, all of the	
following:	
(3) Training to effectively interact with emergency personnel in the event of an emergency call, including an ability to provide	
a resident's medical records to emergency responders.	
Personnel Record Content – Training for All Employees	
On-the Job Training (OJT) or Related Experience Appropriate to Assigned Duties	T-22, §87411(d)(1)-
T-22, §87411(d) All personnel shall be given on the job training or have related experience in the job assigned to them. This training	(6)
and/or related experience shall provide knowledge of and skill in the following, as appropriate for the job assigned and as evidenced	
by safe and effective job performance:	
(1) Principles of good nutrition, good food preparation and storage, and menu planning.	
(2) Housekeeping and sanitation principles.	

(3) Skill and knowledge required to provide necessary resident care and supervision, including the ability to communicate with residents.	
(4) Knowledge required to safely assist with prescribed medications which are self-administered.	
(5) Knowledge necessary in order to recognize early signs of illness and the need for professional help.	
(6) Knowledge of community services and resources.	
(b) knowledge of community services and resources.	
Documentation of Training	T-22, §87412
T-22, §87412(c) Licensees shall maintain in the personnel records verification of required staff training and orientation.	(c)(2)(A)-(D)
(2) Documentation of staff training shall include:	
(A) Trainer's full name;	
(B) Subject(s) covered in the training;	
(C) Date(s) of attendance; and	
(D) Number of training hours per subject.	
1. If the training is provided by a trainer in a classroom setting, documentation shall consist of notices of course completion signed by the trainer.	
2. If the educational hours/units are obtained through an accredited educational institution, documentation	
shall include a copy of a transcript or official grade slip showing a passing mark.	
3. If the educational hours/units are obtained through continuing education, documentation shall include a	
transcript or official grade slip showing a passing mark, if applicable, or a Certificate of Completion.	
Personnel Record Content – Training for All Direct Care Staff	
First Aid and Cardiopulmonary Resuscitation (CPR)	H&S §1569.618(c)(3)
H&S §1569.618(c) The facility shall employ, and the administrator shall schedule, a sufficient number of staff members to do all of	
the following:	
(3) Ensure that at least one staff member who has cardiopulmonary resuscitation (CPR) training and first aid	
training is on duty and on the premises at all times. This paragraph shall not be construed to require staff to provide CPR.	
Resident-Specific Training	T-22, §87606(f)(3)
T-22, §87606(f) To accept or retain a bedridden person, a facility shall ensure the following:	
(3) Staff records include documentation of staff training specific to Care of Bedridden Residents.	
T-22, §87613	T-22, §87613(a)(2)
(a) Prior to admission of a resident with a restricted health condition, the licensee shall:	(A)-(B) & (b)
(2) Ensure that facility staff who will participate in meeting the resident's specialized care needs complete training provided by	
a licensed professional sufficient to meet those needs.	
(A) Training shall include hands-on instruction in both general procedures and resident-specific procedures.	
(B) Training shall be completed prior to the staff providing services to the resident.	
(b) Should the condition of the resident change, all facility staff providing care to that resident shall complete any additional training	
required to meet the resident's new needs, as determined by the resident's physician or a licensed professional designated by the	
physician.	

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T-22, §87625(b) In addition to Section 87611, General Requirements for Allowable Health Conditions, the licensee shall be	T-22, §87625(b)(5)
responsible for the following:	
(5) Ensuring that the appropriately skilled professional developing the bowel and/or bladder program provide training to	
facility staff responsible for implementation of the program.	= 00 00=000(1)(0)
T-22, §87633	T-22, §87633(b)(6)
(b) A current and complete hospice care plan shall be maintained in the facility for each hospice resident and include the following:	(A)-(B) & (f)(1)
(6) Identification of the training needed, which staff members need this training, and who will provide the training relating to	
the licensee's responsibilities for implementation of the hospice care plan.	
(A) The training shall include but not be limited to typical needs of hospice patients, such as turning and incontinence care	
to prevent skin breakdown, hydration, and infection control.	
(B) The hospice agency will provide training specific to the current and ongoing needs of the individual resident receiving	
hospice care and that training must be completed before hospice care to the resident begins.	
(f) The licensee shall maintain a record of all hospice-related training provided to the licensee or facility personnel for a period of	
three years. This record shall be available for review by the Department.	
(1) The record of each training session shall specify the names and credentials of the trainer, the persons in attendance, the	
subject matter covered, and the date and duration of the training session.	
Personnel Record Content – Training for Direct Care Staff Assigned to Assist Residents with Activities of Daily Living (ADL)	
General Training	H&S §1569.625(b)-
H&S §1569.625(b)(1) The department shall adopt regulations to require staff members of residential care facilities for the elderly who	(c) &
assist residents with personal activities of daily living to receive appropriate training. This training shall consist of 40 hours of training.	T-22, §87411(c)(1),
A staff member shall complete 20 hours, including six hours specific to dementia care, as required by subdivision (a) of Section	(4)-(6)
1569.626 and four hours specific to postural supports, restricted health conditions, and hospice care, as required by subdivision (a)	
of Section 1569.696, before working independently with residents. The remaining 20 hours shall include six hours specific to dementia	
care and shall be completed within the first four weeks of employment. The training coursework may utilize various methods of	
instruction, including, but not limited to, lectures, instructional videos, and interactive online courses. The additional 16 hours shall	
be hands-on training.	
(2) In addition to paragraph (1), training requirements shall also include an additional 20 hours annually, eight hours of which	
shall be dementia care training, as required by subdivision (a) of Section 1569.626, and four hours of which shall be specific to	
postural supports, restricted health conditions, and hospice care, as required by subdivision (a) of Section 1569.696. This training	
shall be administered on the job, or in a classroom setting, or both, and may include online training.	
(3) The department shall establish, in consultation with provider organizations, the subject matter required for the training	
required by this section.	
(c) The training shall include, but not be limited to, all of the following:	
(1) Physical limitations and needs of the elderly.	
(2) Importance and techniques for personal care services.	
(3) Residents' rights.	
(4) Policies and procedures regarding medications.	

- (6) Building and fire safety and the appropriate response to emergencies.
- (7) Dementia care, including the use and misuse of antipsychotics, the interaction of drugs commonly used by the elderly, and the adverse effects of psychotropic drugs for use in controlling the behavior of persons with dementia.
- (8) The special needs of persons with Alzheimer's disease and dementia, including nonpharmacologic, person-centered approaches to dementia care.
- (9) Cultural competency and sensitivity in issues relating to the underserved, aging, lesbian, gay, bisexual, and transgender community.

T-22, §87411(c

- (1) Staff providing care shall receive appropriate training in first aid from persons qualified by such agencies as the American Red Cross.
- (4) All training shall be conducted by a person who is knowledgeable in a subject that is relevant to the subject area in which training is to be provided, and who satisfies at least one of the following criteria related to education and experience:
 - (A) Both a four-year college degree, graduate degree or professional degree, and two (2) years of experience in an area relevant to caring for the needs of the elderly, or
 - (B) License to work as a health care provider in California, or
 - (C) At least two years of experience in California as an administrator of an RCFE, within the last eight years, and with a record of administering facilities in substantial compliance, as defined in Section 87101(s).
- (6) The licensee shall maintain documentation pertaining to staff training in the personnel records, as specified in Section 87412(c)(2). For on-the-job training, documentation shall consist of a statement or notation, made by the trainer, of the content covered in the training. Each item of documentation shall include a notation that indicates which of the criteria of Section 87411(c)(3) is met by the trainer.

Dementia Care Training

H&S §1569.626(a) All residential care facilities for the elderly shall meet the following training requirements, as described in Section 1569.625, for all direct care staff:

- (1) Twelve hours of dementia care training, six of which shall be completed before a staff member begins working independently with residents, and the remaining six hours of which shall be completed within the first four weeks of employment. All 12 hours shall be devoted to the care of persons with dementia. The facility may utilize various methods of instruction, including, but not limited to, preceptorship, mentoring, and other forms of observation and demonstration. The orientation time shall be exclusive of any administrative instruction.
- (2) Eight hours of in-service training per year on the subject of serving residents with dementia. This training shall be developed in consultation with individuals or organizations with specific expertise in dementia care or by an outside source with expertise in dementia care. In formulating and providing this training, reference may be made to written materials and literature on dementia and the care and treatment of persons with dementia. This training requirement may be satisfied in one day or over a period of time. This training requirement may be provided at the facility or offsite and may include a combination of observation and practical application.

H&S §1569.626 (a), T-22, §87705 (c)(3)(A)-(C), & T-22, §87707 (a)(1)-(2)

T-22, §87705(c) Licensees who accept and retain residents with dementia shall be responsible for ensuring the following: (3) In addition to the on-the-job training requirements in Section 87411(d), staff who provide direct care to	
residents with dementia shall receive the following training as appropriate for the job assigned and as evidenced by safe and effective job performance:	
(A) Dementia care including, but not limited to, knowledge about hydration, skin care, communication, therapeutic	
activities, behavioral challenges, the environment, and assisting with activities of daily living;	
(B) Recognizing symptoms that may create or aggravate dementia behaviors, including, but not limited to, dehydration,	
urinary tract infections, and problems with swallowing; and	
(C) Recognizing the effects of medications commonly used to treat the symptoms of dementia.	
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Postural Supports, Restricted Health Conditions, and Hospice Care Training H&S §1569.696	H&S §1569.696(a)- (b)
(a) All residential care facilities for the elderly shall provide training to direct care staff on postural supports, restricted conditions or	, ,
health services, and hospice care as a component of the training requirements specified in Section 1569.625. The training shall	
include all of the following:	
(1) Four hours of training on the care, supervision, and special needs of those residents, prior to providing direct care to	
residents. The facility may utilize various methods of instruction, including, but not limited to, preceptorship, mentoring, and	
other forms of observation and demonstration. The orientation time shall be exclusive of any administrative instruction.	
(2) Four hours of training thereafter of in-service training per year on the subject of serving those residents.	
(b) This training shall be developed in consultation with individuals or organizations with specific expertise in the care of those	
residents described in subdivision (a). In formulating and providing this training, reference may be made to written materials and	
literature. This training requirement may be provided at the facility or offsite and may include a combination of observation and	
practical application.	
Personnel Record Content – Training for Direct Care Staff Assigned to Assist Residents with Self-Administration of Medication	
H&S §1569.69	H&S §1569.69(a)(1)-
(a) Each residential care facility for the elderly licensed under this chapter shall ensure that each employee of the facility who assists	(5), (a)(8), (b), (d)-(f)
residents with the self-administration of medications meets all of the following training requirements:	& (i)
(1) In facilities licensed to provide care for 16 or more persons, the employee shall complete 24 hours of initial training. This	
training shall consist of 16 hours of hands-on shadowing training, which shall be completed prior to assisting with the self-	
administration of medications, and 8 hours of other training or instruction, as described in subdivision (f), which shall be	
completed within the first four weeks of employment.	
(2) In facilities licensed to provide care for 15 or fewer persons, the employee shall complete 10 hours of initial training. This	
training shall consist of 6 hours of hands-on shadowing training, which shall be completed prior to assisting with the self-	
administration of medications, and 4 hours of other training or instruction, as described in subdivision (f), which shall be	
completed within the first two weeks of employment.	

- (3) An employee shall be required to complete the training requirements for hands-on shadowing training described in this subdivision prior to assisting any resident in the self-administration of medications. The training and instruction described in this subdivision shall be completed, in their entirety, within the first two weeks of employment.
- **(4)** The training shall cover all of the following areas:
 - (A) The role, responsibilities, and limitations of staff who assist residents with the self-administration of medication, including tasks limited to licensed medical professionals.
 - **(B)** An explanation of the terminology specific to medication assistance.
 - **(C)** An explanation of the different types of medication orders: prescription, over-the-counter, controlled, and other medications.
 - (D) An explanation of the basic rules and precautions of medication assistance.
 - (E) Information on medication forms and routes for medication taken by residents.
 - **(F)** A description of procedures for providing assistance with the self-administration of medications in and out of the facility, and information on the medication documentation system used in the facility.
 - (G) An explanation of guidelines for the proper storage, security, and documentation of centrally stored medications.
 - (H) A description of the processes used for medication ordering, refills, and the receipt of medications from the pharmacy.
 - (I) An explanation of medication side effects, adverse reactions, errors, the adverse effects of psychotropic drugs for use in controlling the behavior of persons with dementia, and the increased risk of death when elderly residents with dementia are given antipsychotic medications.
- (5) To complete the training requirements set forth in this subdivision, each employee shall pass an examination that tests the employee's comprehension of, and competency in, the subjects listed in paragraph (4).
- (8) The training requirements of this section shall be repeated if either of the following occur:
 - (A) An employee returns to work for the same licensee after a break of service of more than 180 consecutive calendar days.
 - **(B)** An employee goes to work for another licensee in a facility in which he or she assists residents with the self-administration of medication.
- (b) Each employee who received training and passed the examination required in paragraph (5) of subdivision (a), and who continues to assist with the self-administration of medicines, shall also complete eight hours of in-service training on medication-related issues in each succeeding 12-month period.
- (d) Each residential care facility for the elderly that provides employee training under this section shall use the training material and the accompanying examination that are developed by, or in consultation with, a licensed nurse, pharmacist, or physician. The licensed residential care facility for the elderly shall maintain the following documentation for each medical consultant used to develop the training:
 - (1) The name, address, and telephone number of the consultant.
 - (2) The date when consultation was provided.
 - (3) The consultant's organization affiliation, if any, and any educational and professional qualifications specific to medication management.

(4) The training topics for which consultation was provided.	
(e) Each person who provides employee training under this section shall meet the following education and experience	
requirements:	
(1) A minimum of five hours of initial, or certified continuing, education or three semester units, or the equivalent, from an	
accredited educational institution, on topics relevant to medication management.	
(2) The person shall meet any of the following practical experience or licensure requirements:	
(A) Two years of full-time experience, within the last four years, as a consultant with expertise in medication management	
in areas covered by the training described in subdivision (a).	
(B) Two years of full-time experience, or the equivalent, within the last four years, as an administrator for a residential care	
facility for the elderly, during which time the individual has acted in substantial compliance with applicable regulations.	
(C) Two years of full-time experience, or the equivalent, within the last four years, as a direct care provider assisting with	
the self-administration of medications for a residential care facility for the elderly, during which time the individual has	
acted in substantial compliance with applicable regulations.	
(D) Possession of a license as a medical professional.	
(3) The licensed residential care facility for the elderly shall maintain the following documentation on each person who	
provides employee training under this section:	
(A) The person's name, address, and telephone number.	
(B) Information on the topics or subject matter covered in the training.	
(C) The times, dates, and hours of training provided.	
(f) Other training or instruction, as required in paragraphs (1) and (2) of subdivision (a), may be provided offsite, and may use	
various methods of instruction, including, but not limited to, all of the following:	
(1) Lectures by presenters who are knowledgeable about medication management.	
(2) Video recorded instruction, interactive material, online training, and books.	
(3) Other written or visual materials approved by organizations or individuals with expertise in medication management.	
	H&S §1569.69(c)
Exemption from Medication Training – Licensed Medical Professionals	
H&S §1569.69(c) The requirements set forth in subdivisions (a) and (b) do not apply to persons who are licensed medical	
professionals.	
Personnel Record Content – Training for Direct Care Staff Who Are Licensed or Certified Medical Professionals	
H&S §1569.625(d) This section shall not apply to certified nurse assistants, certified pursuant to Article 9 (commencing with Section	H&S§1569.625(d)(1)-
1337) of Chapter 2, licensed vocational nurses, licensed pursuant to Chapter 6.5 (commencing with Section 2840) of Division 2 of	(2)
the Business and Professions Code, and registered nurses, licensed pursuant to Chapter 6 (commencing with Section 2700) of	
Division 2 of the Business and Professions Code, except both of the following shall apply:	
(1) A licensed or certified health professional with valid certification shall receive eight hours of training on resident characteristics,	

resident records, and facility practices and procedures prior to providing direct care to residents.	
(2) In addition to paragraph (1), a certified nurse assistant shall also receive the 12 hours of dementia care training specified in	
Section 1569.626 and the annual training specified in paragraph (2) of subdivision (b).	